

**APPLICATION DATA SHEET****Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: DEVICE FOR TREATING A PACKAGING  
MATERIAL BY MEANS OF UV RADIATION

Attorney Docket Number:: 034170-023

Request for Early Publication?:: No

Request for Non-Publication?:: No

Suggested Drawing Figure::

Total Drawing Sheets:: 1

Small Entity?:: No

Latin Name::

Variety Denomination Name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

### **Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Italy

Status:: Full Capacity

Given Name:: Luca

Middle Name::

Family Name:: POPPI

Name Suffix::

City of Residence:: Modena

State or Province of Residence::

Country of Residence:: Italy

Street of Mailing Address:: Via Piemonte 1, Formigine

City of Mailing Address:: Modena

State or Province of Mailing  
Address::

Country of Mailing Address::	Italy
Postal or Zip Code of Mailing Address::	I-41043
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Italy
Status::	Full Capacity
Given Name::	Guido
Middle Name::	
Family Name::	MORUZZI
Name Suffix::	
City of Residence::	Bologna
State or Province of Residence::	
Country of Residence::	Italy
Street of Mailing Address::	Via Venezia 10, S. Lazzaro di Savena
City of Mailing Address::	Bologna
State or Province of Mailing Address::	
Country of Mailing Address::	Italy
Postal or Zip Code of Mailing Address::	I-40068
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Italy
Status::	Full Capacity

Given Name:: Paolo  
Middle Name::  
Family Name:: BENEDETTI  
Name Suffix::  
City of Residence:: Modena  
State or Province of Residence::  
Country of Residence:: Italy  
Street of Mailing Address:: Via Malatesta 21  
City of Mailing Address:: Modena  
State or Province of Mailing Address::  
Country of Mailing Address:: Italy  
Postal or Zip Code of Mailing Address:: I-41100

### **Correspondence Information**

Correspondence Customer Number:: 21839  
Phone Number:: (703) 836-6620  
Fax Number: (703) 836-2021

### **Representative Information**

Representative Customer Number:: 21839

### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/EP03/02471	03/11/03

### **Foreign Priority Information**

<b>Country::</b>	<b>Application Number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
Italy	TO2002A000215	03/12/02	Yes

### **Assignee Information**

<b>Assignee Name::</b>	Tetra Laval Holdings & Finance S.A.
<b>Street of Mailing Address::</b>	Avenue General-Guisan 70
<b>City of Mailing Address::</b>	Pully
<b>State or Province of Mailing Address::</b>	
<b>Country of Mailing Address::</b>	Switzerland
<b>Postal or Zip Code of Mailing Address::</b>	CH-1009